

## School Health Advisory Committee

Tower Building, room 607

August 9<sup>th</sup>, 2001

10:30 a.m. to 2:30 p.m.

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### Committee Members Present:

Ruth Stewart  
Michelle Smith  
Jane Tustin  
Charles Meisgeier  
Michael Hinojosa

Kathi Seay  
Ramón Orduño  
Alma Golden  
Ann Sims  
Tommy Fleming

### Staff Present:

Michelle McComb  
Diane Montoya  
Mike Messinger – facilitator

Marion Stoutner  
Alan Shafer

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### Meeting called to order

1. Quorum not reached at this time causing agenda shift to a non action item

### School Health Program update, Michelle McComb, RN, School Health Program Coordinator

1. Board of Health items
  - A) Annual report to the Board of Health (board) submitted for review and approval
  - B) Nominations for current vacancies offset a future board meeting due to insufficient response to fill consumer vacancies
    1. Current efforts include the Texas Medical Association, Texas Parent Teacher Association, and other consumer agencies to fill nominations.
  2. Consumer Member for the School Health Advisory Committee defined:
    - a. A user of a service provided by or through TDH, or an industry or occupation which is regulated by TDH with the advice of the advisory committee of which the individual would be a member, or a representative of the interests of the general public
- C) TDH aligning the Title V budget with available state and federal dollars. Title V alignment affecting the Maternal and Child Health (MCH) budget approximately \$738,000.00. Of the thirteen positions in the Associateship for Family Health that were affected, four were from the Division of Child Wellness. A history of expenditures greater than MCH funds has contributed to the current situation
  1. Programmatic changes due to the Title V shortfall:
    - a. Combined position – Texas Comprehensive School Health Network Coordinator and the School Nurse Consultant,
    - b. Decreased amount of the ESC contracts approximately 40% in order to balance the program budget and stay within the rider amount,
    - c. SHAC members responded to budget report by suggesting the following possible funding sources:
      - A) CDC infrastructure grant or
      - B) The Governor's discretionary fund or
      - C) Texas Education Agency.

### Quorum reached with the arrival of other members

### Review of previous meeting minutes and public comment period

1. Corrections
  - A) Date needs to be added
  - B) Minutes approved as corrected
2. Public comment period honored with no volunteers

### Report of the Survey Subcommittee, Michelle Smith, chair of subcommittee

1. All the questions from the previous draft were revised to include input that was received from subcommittee members and various member of the committee
  - A) Who was the survey going to be sent to?
    - a. Campus level – provide more detailed picture
    - b. District level – provide a bigger picture
  - B) When was the survey going to be sent?
    - a. In conjunction with the vision/hearing and spinal reports that are sent to every campus.
    - b. Each year provided the final survey is complete and approved by committee prior to this mail out.
  - C) A campus survey will provide more detail
    - a. Nurses covering different campuses,

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- b. Tougher issues such as mental health, and
- c. Possibility of eliminating the mental health category.
- D) Collaboration may be necessary with the comptroller's office as to what information the School Health Advisory Committee wants to collect since Senate Bill (SB) 538 requires the Comptroller's office to conduct an assessment of public school counselor duties

### **Suggestion and concerns of the current draft survey**

1. No. 23 on this draft, suggestion to word the question as follows: "Counselors, psychologists, etc."
2. No. 26, what is meant by at-risk students?
3. Recommend the deletion of No. 25 & 26
4. Recommend that the survey specify between professional and non-professionals
5. No. 23, recommend "How many staff in your district are trained to assist students in mental health issues?"
6. No. 23 & 24 recommend "How many are employed in your district" vs. "in your district"
7. No. 23 & 24, recommend "How many full-time licensed mental health professionals are employed in your district"
8. Recommend a question asking if your school has access to partnerships and community mental health providers
9. Recommend making sure we are asking exactly what we are trying to determine
10. Will a reasonable amount of schools respond to the survey?
11. Previous survey had a really good response rate, due to cooperation between other agencies and notification that went to the school districts
12. Formatting of the survey is a concern
  - A) This design of the draft was set up to get the person completing the survey to read the questions, when it is read, people are more likely to answer the question accurately
  - B) Goal is to get people to answer the survey
13. No. 27 recommend "are there barriers?"
14. No. 27 recommend "not involved" vs. "no interest", and add "lack of funds, lack of support, other"
15. No. 27 recommend changing "no support from school board" to something less provoking, such as priorities
16. By standard, there is not a need to immunize children that are home-schooled.
17. The theory behind not having to immunize home-schooled children is due to the child not being introduced into a populated area.
18. No. 33, recommend this question for the campus level
19. Suggest that counselor questions be moved to the end of the survey and not in the middle of the health services section.
20. No. 37 should be understood that STD's are included in the human sexuality course taught in schools
21. No. 38 should be strengthened to include the components, parental involvement, physical education, nutrition, safety, environment, staff wellness, of a coordinated school health program
22. Suggest this wording "What position in your district is responsible for a coordinated school health program?"
23. No. 22 has been altered, change "full-time" to designated"
24. No. 32 in regards to "closet," NOT a joke, committee discussion of other school locations that serve as the "nurse's office"
25. Suggest No. 38 be moved to No. 28
26. No. 43, policy legal vs. local, suggestion made to have question state: "Do you have a locally developed school district health procedure manual?"

### **Report from the Office of Governmental Relations – Paul Bollinger**

Title V changes

1. Budget structures are changing as a result
  - A) Causing agency to change current procedure dealing with finances for programs
  - B) Lack of funds, not budget cut

Immunization issue not going away (HB 1702 regarding philosophical exemption/immunization registry)

1. Need of an IMMtrac that will work
  - A) Immunization registry to help providers and clinics organize to be able to access a person's immunization records anywhere,
  - B) Currently Texas is ranked #50 in immunizing children under 2, and
  - C) Most likely to be seen in the next legislative session.

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### Comments:

Interim study on school finance could have ramifications for SHAC issues:

1. Dr. Hinojosa announced September 1, 2001, Texas Association of School Administrators will monitor this study;
2. Ms. Seay indicated the state is already facing a 5-7 billion shortfall for the next legislative session.

Legislative issues:

1. From the commissioner
2. From programs
  - A) programs need to start their preparation now,
  - B) decisions are made the summer and fall prior to the legislative session in regards to priority,
  - C) Formal steps for submission of "bill," needs to happen winter of the off year for the session,
  - D) Pay attention to affect on other agencies,
  - E) Find out where stakeholders stand in the off year of legislative sessions,
  - F) Earlier is better.
3. How TDH initiatives fared:
  - A) Thirty to fifty were reviewed
  - B) Twenty bills were introduced, fifteen passed, most uncontroversial
4. SHAC can advise the board regarding legislation, advocacy shouldn't be too heavy – be sure all stakeholders are involved
5. Committee could choose which issues, in an official capacity to report to the board around this time
6. Narrow each issue down for clarity. In one meeting, decide priorities you have with a running list, where the issues are, and start prioritizing as meeting commence. Devote time on the agenda to decide which issue to target and track
7. Ms. Seay announced to the committee that she is exploring running for a state representative in a newly formed district, north of Austin (district 20 – Milam County and parts of Williamson County), but will continue to serve as a parent member for the time being

### TEA Request – Tommy Fleming

1. TEA now has the responsibility to uphold Senate Bill (SB) 31, regarding providing parents and others with information on bacterial meningitis.
  - A) Suggestions are needed on ways to disseminate this information to the school districts.
    1. District websites,
    2. Newspaper Editorials,
    3. Send out with report card at mid semester, or
    4. Could be sent with the enrollment packet.
  - B) All items are evident that are addressed in the law.
  - C) Think about translation of what is sent out to school districts.
  - D) SHAC to aid in the selection of material to be sent out, and sent with "unofficial" approval back to TEA to disseminate.

### Search for the Commissioner of Health status – Ruth Stewart

1. Twenty-eight responses to the open position of the Commissioner of Health.
2. Ten have interviewed with three going on to meet with the board and Don Gilbert, Commissioner of Health and Human Services.
3. Interviews happening during this meeting time selection will not be known until a later date.

Adjourn



Ruth Stewart, MS, RNCS Chair  
School Health Advisory Committee  
Approved October 11, 2001